

TACTICAL RESPONSE REPORT/Chicago Police Department

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|---|---|--|---|--|--|--|---|--|---|--|--|
| 1. DATE OF INCIDENT 22-NOV-2012 | | TIME 16:05:00 | | 2. ADDRESS OF OCCURRENCE 6253 S CALIFORNIA AVE CHICAGO, IL 60629 | | | 3. LOCATION CODE 304 | | 4. BEAT/OCCUR 0825 | | |
| MEMBER INVOLVED | 5. POSITION 9206 | 6. LAST NAME MANGUERRA | 7. FIRST NAME GLENN L | 8. STAR NO. 14098 | 9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F | 10. RACE CODE API | 11. AGE [REDACTED] | 12. HT. 508 | 13. WT. 166 | | |
| | 14. DATE OF APPT. 04-OCT-1999 | 15. EMPLOYEE NO. [REDACTED] | 16. UNIT & BEAT OF ASSIGNMENT 477 5813 | 17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off | 18. MEMBER INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No | 19. MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No | | | | | |
| SUBJECT INFORMATION | 20. LAST NAME JAMISON | 21. FIRST NAME ISMAAEL | 22. M.I. KAREE | 23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F | 24. RACE BLK | 25. D.O.B. [REDACTED] | 26. HT. 506 | 27. WT. 200 | | | |
| | 28. ADDRESS [REDACTED] | 29. TELEPHONE NO. [REDACTED] | 30. WAS SUBJECT ARMED/VERBAL THREAT (ASSAULT), HANDS/FISTS <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | | | 31. SUBJECT INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No | 32. SUBJECT ALLEGED INJURY? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No | | | | |
| REASON FOR USE OF FORCE (Check all that apply) | 33. WHERE WAS MEDICAL TREATMENT OBTAINED? CHRIST | | | 34. BY WHOM? [REDACTED] | | | 35. CONITION <input type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input checked="" type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid | | | | |
| | 36. CHARGES PLACED 720 ILCS 5.0/12-3.05-D-1, 720 ILCS 5.0/12-3.05-A-1, 720 ILCS 5.0/12-3.05-D-7 | | | | 37. CB NO. 18544216 | | IR NO. <input type="checkbox"/> DNA | | | | |
| SUBJECTS ACTIONS | PASSIVE RESISTER | | ACTIVE RESISTER | | ASSAILANT: ASSAULT | | ASSAILANT: BATTERY | | ASSAILANT: DEADLY FORCE | | |
| | DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input type="checkbox"/> OTHER <input type="checkbox"/> | | FLED <input type="checkbox"/> PULLED AWAY <input type="checkbox"/> OTHER <input type="checkbox"/> | | IMMINENT THREAT OF BATTERY <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | | ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | | USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER SEE ADDITIONAL INFO BOX <input type="checkbox"/> | | |
| MEMBER'S RESPONSE | MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLOS <input type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER <input type="checkbox"/> | | OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input type="checkbox"/> TASER (Contact Stun) <input type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER <input type="checkbox"/> | | ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER <input type="checkbox"/> | | KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/> | | FIREARM <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | | |
| | 39. *OC/CHEMICAL WEAPON AUTHORIZED BY (NAME) [REDACTED] | | | 40. ADDITIONAL INFORMATION AGGRESSIVELY CHARGED IN A THREATENING MANNER WHILE STATING "I'LL KILL YOU!" | | | | | | | |
| WEAPON DISCHARGE INCIDENT | POSITION | | STAR NO. | | UNIT | | | | | | |
| | 41. WEAPON TYPE <input checked="" type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN | | 42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors | | 43. LIGHTING CONDITIONS <input checked="" type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial | | 44. WEATHER CONDITIONS OTHER | | | | |
| 45. MAKE/MANUFACTURER SMITH & WESSON -US- (BODYGUARD, CHIEF SPECIAL) | | 46. MODEL 5943 | | 47. BARREL LENGTH 4 | | 48. CALIBER/GAUGE 9 MM | | | | | |
| 49. TASER DART/ID NO. | | 50. WEAPON SERIAL NO. (Include Letters) KJF3371 | | 51. CHICAGO GUN REG. NO. 624562 | | 52. IL FIREARM OWNER ID. NO. [REDACTED] | | 53. HANOGUN CERTIFICATE NO. | | | |
| 54. SPECIAL WEAPON CERTIFICATE NO. | | 55. PROPERTY INVENTORY NO. | | 56. TYPE OF AMMUNITION USED Department Issued | | 57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER. 1 | | 58. TOTAL NO. OF SHOTS MEMBER FIRED 2 | | | |
| 59. WHO FIRED FIRST SHOT <input type="checkbox"/> 03 OTHER (SPECIFY) | | 60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO | | 61. NO. OF CARTRIDGES/ SHOT SHELLS RELOADED 2 | | 62. HOW WAS MEMBER'S HANDGUN WORN <input checked="" type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) | | 63. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO | | | |
| 64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD | | 65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO | | 66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) NONE | | 67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input checked="" type="checkbox"/> 01 0 - 5 FT. <input type="checkbox"/> 02 5 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT. | | | | | |
| 68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBER'S WEAPON <input checked="" type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN | | 69. POSITION OF MEMBER DISCHARGING WEAPON <input checked="" type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY) | | | | | | | | | |
| CASE INFO. | 70. NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. | | | | | | | | | | |
| | 71. NOTIFICATIONS (FIREARM INCIDENT): <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. <input checked="" type="checkbox"/> OP COMMAND <input checked="" type="checkbox"/> DET. DIV. Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report. | | | | | | | | | | |
| SIGNATURES | 73. REPORTING MEMBER (Print Name) MANGUERRA, GLENN L | | | STAR/EMPLOYEE NO. 14098 | | SIGNATURE [REDACTED] | | | | | |
| | 74. REVIEWING SUPERVISOR (Print Name) MAIDA, CHARLES V | | | | | | | | | | |
| 75. DATE REVIEWED 22-NOV-2012 23:47:02 | | | | | | | | | | | |

100 # 1058573

Attachment # 6

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR; 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING; 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☒ UNABLE TO INTERVIEW (Specify Reason)

Offender undergoing surgery

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

Based on the facts available at the time, it is the preliminary determination of the undersigned that Ofc. Glenn Manguerra acted in compliance with Department policy in that, Officer Manguerra fired his weapon in fear of his life after the offender lunged toward Ofc. Manguerra in an effort to cause death or great bodily harm to him. The offender had previously injured a minimum of two victims during this incident causing them to be transported to hospitals for emergency treatment. The offender also injured numerous other victims during his attacks.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1058573 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

CAROTHERS, ANTHONY J

SIGNATURE

DATE COMPLETED

TIME

23-NOV-2012 00:13:38

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

☐ SUPPLEMENTARY REPORT

☐ I.O.D. REPORT

☐ CASE REPORT

☒ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

80. TOTAL TRR'S THIS EVENT No.

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